

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	DOUGH TREATMENT FACILITY
Attorney Docket Number::	ROTHAMMEL1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	7
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Norbert
Middle Name::	

Family Name::	ROTHAMMEL
Name Suffix::	
City of Residence::	Monchsroth
State or Province of Residence::	
Country of Residence::	Germany
Street of Mailing Address::	Am Lettenfeld 17
City of Mailing Address::	Monchsroth
State or Province of Mailing Address::	
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	D-91614
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Austria
Status::	Full Capacity
Given Name::	Ferdinand
Middle Name::	
Family Name::	BODENSTORFER
Name Suffix::	
City of Residence::	Wien
State or Province of Residence::	
Country of Residence::	Austria
Street of Mailing Address::	Steinmullergasse 33
City of Mailing Address::	Wien
State or Province of Mailing Address::	
Country of Mailing Address::	Austria
Postal or Zip Code of Mailing Address::	A-1160
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Alexander
Middle Name::	
Family Name::	MEIER
Name Suffix::	
City of Residence::	Durrwangen

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Kellerbuck 6

City of Mailing Address:: Durrwangen

State or Province of Mailing Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: D-91602

**Correspondence Information**

Correspondence Customer Number:: 001444

**Representative Information**

Representative Customer Number:: 001444

**Domestic Priority Information**

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
Germany	103 06 437.0	02/15/03	Yes

**Assignment Information**

Assignee Name:: Werner & Pfleiderer Lebensmitteltechnik GmbH

Street of Mailing Address:: von-Raumer-Strasse 8-18

City of Mailing Address:: Dinkelsbuhl

State or Province of Mailing Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: D-91550